

County: Sauk

Facility ID: 4650

Page 1

ST CLARE MEADOWS CARE CENTER

1414 JEFFERSON STREET

BARABOO

53913

Phone: (608) 356-4838

Ownership:

Non-Profit Corporation

Operated from 1/1 To 12/31 Days of Operation: 365

Highest Level License:

Skilled

Operate in Conjunction with Hospital? No

Operate in Conjunction with CBRF? Yes

Number of Beds Set Up and Staffed (12/31/03): 102

Title 18 (Medicare) Certified? Yes

Total Licensed Bed Capacity (12/31/03): 102

Title 19 (Medicaid) Certified? Yes

Number of Residents on 12/31/03: 101

Average Daily Census: 99

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		23.8
Supp. Home Care-Personal Care	No					1 - 4 Years		44.6
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.0	More Than 4 Years		13.9
Day Services	No	Mental Illness (Org./Psy)	13.9	65 - 74	5.0			----
Respite Care	Yes	Mental Illness (Other)	4.0	75 - 84	32.7			82.2
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	51.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	7.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	3.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	18.8	65 & Over	97.0	-----		
Transportation	No	Cerebrovascular	19.8		-----	RNs		14.7
Referral Service	Yes	Diabetes	10.9	Gender	%	LPNs		4.8
Other Services	No	Respiratory	4.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	22.8	Male	22.8	Aides, & Orderlies		
Mentally Ill	Yes		----	Female	77.2			
Provide Day Programming for			100.0		----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total Resi- dents	% Of All
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	
Int. Skilled Care	1	5.9	306	5	8.6	136	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	6
Skilled Care	16	94.1	306	51	87.9	117	0	0.0	0	25	96.2	175	0	0.0	0	0	0.0	0	92
Intermediate	---	---	---	2	3.4	98	0	0.0	0	1	3.8	175	0	0.0	0	0	0.0	0	3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Total	17	100.0		58	100.0		0	0.0		26	100.0		0	0.0		0	0.0		101

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of Residents
Private Home/No Home Health	1.1	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	
Private Home/With Home Health	0.6	Bathing	1.0	49.5	49.5	101
Other Nursing Homes	2.2	Dressing	7.9	58.4	33.7	101
Acute Care Hospitals	88.3	Transferring	21.8	50.5	27.7	101
Psych. Hosp.-MR/DD Facilities	2.8	Toilet Use	20.8	53.5	25.7	101
Rehabilitation Hospitals	2.2	Eating	37.6	50.5	11.9	101
Other Locations	2.8	*****				
Total Number of Admissions	180	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.9	Receiving Respiratory Care		23.8
Private Home/No Home Health	14.4	Occ/Freq. Incontinent of Bladder	63.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	31.7	Occ/Freq. Incontinent of Bowel	26.7	Receiving Suctioning		1.0
Other Nursing Homes	2.2			Receiving Ostomy Care		3.0
Acute Care Hospitals	7.2	Mobility		Receiving Tube Feeding		1.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		32.7
Rehabilitation Hospitals	0.0					
Other Locations	14.4	Skin Care		Other Resident Characteristics		
Deaths	30.0	With Pressure Sores	9.9	Have Advance Directives		100.0
Total Number of Discharges (Including Deaths)	180	With Rashes	9.9	Medications		
				Receiving Psychoactive Drugs		64.4

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit %	Peer Group Ratio	Bed Size: 100-199 %	Peer Group Ratio	Licensure: Skilled %	Peer Group Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	97.1	94.0	1.03	87.2	1.11	88.1	1.10	87.4	1.11
Current Residents from In-County	89.1	77.2	1.15	78.9	1.13	69.7	1.28	76.7	1.16
Admissions from In-County, Still Residing	20.6	23.9	0.86	23.1	0.89	21.4	0.96	19.6	1.05
Admissions/Average Daily Census	181.8	101.9	1.78	115.9	1.57	109.6	1.66	141.3	1.29
Discharges/Average Daily Census	181.8	102.4	1.78	117.7	1.54	111.3	1.63	142.5	1.28
Discharges To Private Residence/Average Daily Census	83.8	39.2	2.14	46.3	1.81	42.9	1.95	61.6	1.36
Residents Receiving Skilled Care	97.0	96.3	1.01	96.5	1.01	92.4	1.05	88.1	1.10
Residents Aged 65 and Older	97.0	97.2	1.00	93.3	1.04	93.1	1.04	87.8	1.11
Title 19 (Medicaid) Funded Residents	57.4	64.2	0.89	68.3	0.84	68.8	0.83	65.9	0.87
Private Pay Funded Residents	25.7	25.9	0.99	19.3	1.33	20.5	1.25	21.0	1.23
Developmentally Disabled Residents	0.0	0.5	0.00	0.5	0.00	0.5	0.00	6.5	0.00
Mentally Ill Residents	17.8	38.5	0.46	39.6	0.45	38.2	0.47	33.6	0.53
General Medical Service Residents	22.8	20.1	1.13	21.6	1.06	21.9	1.04	20.6	1.11
Impaired ADL (Mean)	56.2	51.0	1.10	50.4	1.11	48.0	1.17	49.4	1.14
Psychological Problems	64.4	53.0	1.21	55.3	1.16	54.9	1.17	57.4	1.12
Nursing Care Required (Mean)	10.1	7.7	1.31	7.4	1.37	7.3	1.39	7.3	1.39